
TITLE 842 INDIANA BOARD OF PHYSICAL THERAPY

Final Rule

LSA Document #22-353(F)

DIGEST

Amends [842 IAC 1-1-1](#) concerning definitions. Amends [842 IAC 1-1-2](#) concerning standards of practice. Amends [842 IAC 1-1-3](#) concerning accreditation of educational programs. Amends [842 IAC 1-2-1](#) concerning fees. Amends [842 IAC 1-3-1](#), [842 IAC 1-3-2](#), and [842 IAC 1-3-5](#), concerning licensure, Social Security numbers, and changing references to "committee" and "bureau". Amends [842 IAC 1-4-1](#), concerning license registrations and renewals, and to change references to "committee" and "bureau". Amends [842 IAC 1-4-2](#), concerning contact information of licensees, and to change the reference to "committee". Amends [842 IAC 1-4-3](#) concerning reinstatement of a delinquent license. Amends [842 IAC 1-5-1](#), [842 IAC 1-5-2](#), and [842 IAC 1-6-1](#) to change references to "committee". Amends [842 IAC 1-6-2](#) concerning professional conduct. Amends [842 IAC 1-7-2](#), concerning responsibilities of licensees, and to change references to "committee". Amends [842 IAC 1-7-4](#) to change references to "committee". Amends [842 IAC 1-7-5](#), concerning approved organizations for continuing competency courses, and to change references to "committee". Repeals [842 IAC 1-3-3](#) and [842 IAC 1-3-4](#). Effective 30 days after filing with the Publisher.

[842 IAC 1-1-1](#); [842 IAC 1-1-2](#); [842 IAC 1-1-3](#); [842 IAC 1-2-1](#); [842 IAC 1-3-1](#); [842 IAC 1-3-2](#); [842 IAC 1-3-3](#); [842 IAC 1-3-4](#); [842 IAC 1-3-5](#); [842 IAC 1-4-1](#); [842 IAC 1-4-2](#); [842 IAC 1-4-3](#); [842 IAC 1-5-1](#); [842 IAC 1-5-2](#); [842 IAC 1-6-1](#); [842 IAC 1-6-2](#); [842 IAC 1-7-2](#); [842 IAC 1-7-4](#); [842 IAC 1-7-5](#)

SECTION 1. [842 IAC 1-1-1](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-1-1](#) Definitions**Authority:** [IC 25-27-1-5](#)**Affected:** [IC 25-27-1-1](#); [IC 25-27-1-2](#); [IC 25-27-1-8](#); [IC 25-27-2-2](#)

Sec. 1. (a) The definitions in this section apply throughout this article.

~~(b) "Board" refers to the medical licensing board of Indiana.~~

~~(c) "Bureau" refers to the health professions bureau.~~

~~(d) "Committee" refers to the Indiana physical therapy committee.~~

(b) "Agency" refers to the Indiana professional licensing agency.

~~(e)~~ **(c)** "Contact hour" means a unit of measure for a continuing competency activity. One (1) contact hour equals at least fifty (50) minutes in a learning activity.

~~(f)~~ **(d)** "Continuing **competence**" or "**continuing** competency means those continuing competency activities as used in ~~[844 IAC 6-8-1](#)~~. **competency** [sic]" has the meaning set forth in [IC 25-27-1-10\(11\)](#) [sic, [IC 25-27-1-1\(11\)](#)] and [IC 25-27-2-2\(5\)](#). The requirements for demonstrating continuing competence are set forth in [842 IAC 1-7-1](#).

~~(g)~~ **(e)** "Direct supervision" means that the supervising physical therapist or physician at all times shall be available and under all circumstances shall be absolutely responsible for the direction and the actions of the person supervised when services are performed by the physical therapist's assistant or holder of a temporary permit issued under ~~[IC 25-27-1-8\(d\)](#)~~. For the holder of a temporary permit issued under ~~[IC 25-27-1-8\(d\)](#)~~, unless the supervising physical therapist or physician is on the premises to provide constant supervision, the holder of a temporary permit shall meet with the physical therapist or physician at least once each working day to review all patients' treatments. This meeting must include the actual presence of the physical therapist or physician and the holder of a temporary permit. The patient's care shall always be the responsibility of the supervising physical therapist or physician. Reports written by the holder of a temporary permit for inclusion in the patients' record shall

be countersigned by the physical therapist or physician who may enter any remarks, revisions, or additions as the physical therapist or physician deems appropriate. With respect to the supervision of physical therapist's assistants under [IC 25-27-1-2\(c\)](#), unless the supervising physical therapist or physician is on the premises to provide constant supervision, the physical therapist's assistant shall consult with the supervising physical therapist or physician at least once each working day to review all patients' treatments. The supervising physical therapist or physician shall examine each patient not less than:

- (1) every fourteen (14) days for inpatients in either a hospital or comprehensive rehabilitation facility;
- (2) the earlier of every ninety (90) days or six (6) physical therapy visits for patients in a facility for the mentally retarded (MR) and developmentally disabled (DD) and school system patients; and
- (3) the earlier of every thirty (30) days or every fifteen (15) physical therapy visits for all other patients;

to review the patients' treatment and progress. If this daily consultation is not face-to-face, the physical therapist or physician may not supervise more than the equivalent of three (3) full-time physical therapist's assistants. A consultation between a supervising physical therapist or a physician and the physical therapist's assistant may be in person, by telephone, or by a telecommunications device for the deaf (TDD), so long as there is interactive communication concerning patient care. **has the meaning set forth in [IC 25-27-1-1\(13\)](#).**

~~(h)~~ **(f)** "Physical therapist's **therapist** assistant" means a person who is registered by the committee to assist in the practice of physical therapy under the direct supervision of a licensed physical therapist or under the direct supervision of a physician by performing those assigned physical therapy procedures identified in subsection ~~(i)(3)~~, but not those specified in subsection ~~(i)(1)~~ or ~~(i)(2)~~. **has the meaning set forth in [IC 25-27-1-1\(3\)](#).**

~~(i)~~ **(g)** "Physical therapy" **has the meaning set forth in [IC 25-27-1-1\(1\)](#)** and includes, but is not limited to, such measures as the following:

- (1) Performing and interpreting tests and measurements of neuromuscular, musculoskeletal, cardiac, and pulmonary functions as a part of treatment, interpretation of physician referrals, initial patient evaluation, initial and ongoing treatment planning, periodic reevaluation of the patient, and adjustment of the treatment plan.
- (2) Planning initial and subsequent treatment programs on the basis of test findings, **and if the patient is referred for physical therapy**, within the orders of a referring practitioner who is licensed to practice medicine, osteopathic medicine, dentistry, podiatry, or chiropractic. **provider.**
- (3) Administering treatment through the use of physical, chemical, or other properties of heat or cold, light, water, electricity, massage, mechanical devices, and therapeutic exercise, which includes all types of physical rehabilitative techniques and procedures, **including using solid filiform needles to treat neuromusculoskeletal pain and dysfunction (dry needling).**

(h) "Referring provider" refers to an individual authorized to provide an order or referral for physical therapy under [IC 25-27-1-2\(b\)](#).

(Indiana Board of Physical Therapy; [842 IAC 1-1-1](#); filed Mar 10, 1983, 3:59 p.m.: 6 IR 773; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1937; filed Mar 6, 1986, 3:00 p.m.: 9 IR 1662; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2731; filed Apr 14, 1994, 5:00 p.m.: 17 IR 2077; filed Sep 22, 1994, 4:30 p.m.: 18 IR 261; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:15 a.m.: 28 IR 209; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); filed Jan 30, 2013, 12:31 p.m.: [20130227-IR-844120204FRA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-1-2](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-1-1](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 2. [842 IAC 1-1-2](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-1-2](#) Standards of practice for physical therapy services

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-27-1-1](#); [IC 25-27-1-2](#); [IC 25-27-1-8](#)

Sec. 2. (a) A physical therapy service shall be under the direction of a licensed physical therapist who is qualified by experience, demonstrated ability, and specialized education. **The supervising physical therapist at all times shall be available and under all circumstances shall be responsible for the direction and the actions of the person supervised when services are performed by the physical therapist assistant, or the holder of a temporary permit issued under [IC 25-27-1-8\(d\)](#). For the holder of a temporary permit issued**

under [IC 25-27-1-8\(d\)](#), unless the supervising physical therapist is on the premises to provide constant supervision, the holder of a temporary permit shall meet with the physical therapist at least once each working day to review all patients' treatments. This meeting must include the actual presence of the physical therapist and the holder of a temporary permit. The patients' care shall always be the responsibility of the supervising physical therapist. Reports written by the holder of a temporary permit for inclusion in the patient record shall be countersigned by the physical therapist who may enter any remarks, revisions, or additions as the physical therapist deems appropriate. With respect to the supervision of the physical therapist assistants under [IC 25-27-1-2\(c\)](#), unless the supervising physical therapist is on the premises to provide constant supervision, the physical therapist assistant shall consult with the supervising physical therapist at least once each working day to review all patients' treatments. The supervising physical therapist shall examine each patient not less than:

- (1) every fourteen (14) days for inpatients in either a hospital or comprehensive rehabilitation facility;
 - (2) the earlier of every ninety (90) days or six (6) physical therapy visits for patients in a facility for the developmentally disabled (DD) and school system patients; and
 - (3) the earlier of every thirty (30) days or every fifteen (15) physical therapy visits for all other patients;
- to review the patients' treatments and progress. If this daily consultation is not face-to-face, the physical therapist may not supervise more than the equivalent of three (3) full-time physical therapist assistants. Consultation between a supervising physical therapist and the physical therapist assistant may be in person, by telephone, or by a telecommunications device for the deaf (TDD), so long as there is interactive communication concerning patient care.

(b) A physical therapist shall develop a plan of care for each patient referred and shall be responsible for the plan implementation and modification. **When a patient is referred for physical therapy by a referring provider,** a physical therapist shall consult with the referring practitioner **provider** regarding any contraindicated or unjustified treatment.

(c) The physical plant shall be planned, constructed, and equipped to provide adequate space and a proper environment to meet the service needs with safety and efficiency.

(d) A physical therapist assistant may assist in the practice of physical therapy under the supervision of a licensed physical therapist by performing those assigned physical therapy procedures identified in [842 IAC 1-1-1\(g\)\(3\)](#) [sic, section 1(g)(3) of this rule] with the exception of the use of solid filiform needles to treat neuromuscular pain and dysfunction (dry needling), but not those specified in subsections [842 IAC 1-1-1\(g\)\(1\)](#) or [\(2\)](#) [sic, section 1(g)(1) or 1(g)(2) of this rule].

(Indiana Board of Physical Therapy; [842 IAC 1-1-2](#); filed Mar 10, 1983, 3:59 p.m.: 6 IR 773; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1938; filed Sep 22, 1994, 4:30 p.m.: 18 IR 262; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; readopted filed Oct 4, 2007, 3:35 p.m.: [20071031-IR-844070051RFA](#); readopted filed Nov 25, 2013, 9:24 a.m.: [20131225-IR-844130307RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-1-3](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-1-2](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 3. [842 IAC 1-1-3](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-1-3](#) Accreditation of educational programs

Authority: [IC 25-27-1-5](#)

Affected: [IC 4-22-2-21](#); [IC 25-27-1-1](#)

Sec. 3. (a) The ~~committee~~ **board** shall maintain a list of physical therapy and physical therapist's therapist assistant educational programs that ~~the committee has approved.~~ **meet the requirements of subsection (b).** This list shall be available in written form from the Health Professions Bureau, **Indiana Professional Licensing Agency**, 402 West Washington Street, Room ~~W066~~ **W072**, Indianapolis, Indiana 46204.

(b) An approved program is ~~one maintaining standards equivalent to those adopted by the Commission on Accreditation in Physical Therapy Education (CAPTE), Accreditation Handbook, April 2002 edition. These standards are hereby adopted as those of the committee and are hereby incorporated by reference under [IC 4-22-2-21](#) and do not include any amendments or subsequent editions. A copy of such standards shall be available~~

for public inspection at the office of the Health Professions Bureau, 402 West Washington Street, Room W066, Indianapolis, Indiana 46204. Copies of such standards are available from the American Physical Therapy Association, 1111 North Fairfax Street, Alexandria, Virginia 22314 or at <http://www.apta.org/Education/accreditation>. **for physical therapists is a professional physical therapist education program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) or its successor. An approved program for physical therapist assistants is one that is accredited by CAPTE or its successor.**

(c) ~~An educational program, or~~ A graduate or candidate for graduation from an educational program, which is not on the list of approved programs, ~~maintained by the committee,~~ may apply to the ~~committee board~~ **board** for approval by petition demonstrating that the educational program meets the ~~committee's board's~~ **board's** standards for approval **of the accreditation agency identified in subsection (b).**

(d) The ~~committee board~~ **board** may remove an educational program from its list of approved programs upon the grounds that the educational program no longer meets its standards for approval **of the accreditation agency identified in subsection (b).**

(Indiana Board of Physical Therapy; [842 IAC 1-1-3](#); filed Aug 6, 1987, 3:00 p.m.: 10 IR 2732; filed Sep 22, 1994, 4:30 p.m.: 18 IR 263; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Oct 7, 2002, 11:51 a.m.: 26 IR 377; filed Aug 26, 2004, 10:20 a.m.: 28 IR 203; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-1-4](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-1-3](#)) by P.L.160-2019, SECTION 31, effective July 1, 2019.

SECTION 4. [842 IAC 1-2-1](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-2-1](#) Fees

Authority: [IC 25-1-8-2](#); [IC 25-27-1-5](#)

Affected: [IC 25-27-1-7](#)

Sec. 1. (a) The board shall charge and collect the following fees:

Application for licensure/certification	\$100
Application to repeat national examination	\$50
License/certification renewal	\$100 biennially
Temporary permit	\$50
Verification of licensure/certification	\$10
Duplicate wall license/certification	\$10
Application for compact privilege	\$100 in addition to the Compact Commission fee established by the Physical Therapy Compact Commission
Compact privilege renewal	\$100 biennially in addition to the Compact Commission fee established by the Physical Therapy Compact Commission

(b) Applicants required to take the national examination for licensure shall pay a fee directly to a professional examination service in the amount set by the examination service.

(Indiana Board of Physical Therapy; [842 IAC 1-2-1](#); filed Feb 11, 2002, 4:35 p.m.: 25 IR 2247; readopted filed Oct 10, 2008, 8:57 a.m.: [20081105-IR-844080340RFA](#); readopted filed Dec 2, 2014, 10:09 a.m.: [20141231-IR-844140391RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-2-2](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-2-1](#)) by P.L.160-2019, SECTION 31, effective July 1, 2019.

SECTION 5. [842 IAC 1-3-1](#) IS AMENDED TO READ AS FOLLOWS:

842 IAC 1-3-1 Licensure by endorsement

Authority: [IC 25-27-1-5](#)

Affected: [IC 4-1-8-1](#); [IC 25-1-9](#); [IC 25-27-1](#)

Sec. 1. The ~~committee may~~ **board shall** issue a license by endorsement to an applicant who completes the following:

- (1) Submits a sworn application in proper form.
- (2) Submits the fee specified in [844 IAC 6-2-2 842 IAC 1-2-1](#).
- (3) Presents satisfactory evidence that he or she does not have a conviction for an act, within or outside of this state, that would constitute a ground for disciplinary sanction under [IC 25-1-9](#).
- (4) Has been certified by a written examination provided by the ~~committee board~~. The uniform criterion-referenced passing score on the physical therapy and physical therapist's therapist assistant examinations, which has been adopted by the board of directors of the Federation of State Boards of Physical Therapy, is the required passing score. This criterion-referenced passing score shall be a scaled score of six hundred (600). If the applicant was licensed in a state that required an examination, other than an examination provided by the ~~committee board~~, the **committee board** shall determine whether the applicant took and passed a postgraduate written examination substantially equivalent in content and difficulty to the examination adopted by the ~~committee board~~.
- (5) Submits verification from all states in which the applicant has been or is currently licensed-certified. The verification must include a statement verifying whether the applicant has ever been disciplined in any manner.
- (6) Submits an official transcript of grades from a physical therapy school or physical therapist's therapist assistant school evidencing that the applicant is a graduate of a physical therapist or physical therapist's therapist assistant entry-level educational program that meets the requirements of [844 IAC 6-1-4 842 IAC 1-1-3](#) and that a degree has been conferred. If the transcript is not in English, the applicant must submit a certified copy of an official English translation. Graduates of a foreign physical therapy program must submit notarized copies of their transcripts if official transcripts are unavailable.
- ~~(7) Submits one (1) passport-type quality photograph of the applicant taken within the last eight (8) weeks.~~
- ~~(8) (7) Submits the applicant's valid United States Social Security number.~~
- ~~(9) (8) Meets all other minimum requirements as specified in [IC 25-27-1](#).~~

(Indiana Board of Physical Therapy; [842 IAC 1-3-1](#); filed Mar 10, 1983, 3:59 p.m.: 6 IR 774; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1938; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2732; filed Apr 5, 1990, 2:45 p.m.: 13 IR 1413; filed Sep 22, 1994, 4:30 p.m.: 18 IR 263; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 203; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-3-1](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-3-1](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 6. [842 IAC 1-3-2](#) IS AMENDED TO READ AS FOLLOWS:

842 IAC 1-3-2 Licensure by examination

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-1-9](#); [IC 25-27-1-6](#)

Sec. 2. (a) The ~~committee board~~ **board shall** issue a license by examination to an applicant who completes the following:

- (1) Submits a sworn application in proper form.
- (2) Submits the fee specified in [844 IAC 6-2-2 842 IAC 1-2-1](#).
- (3) Presents satisfactory evidence that he or she does not have a conviction for an act, within or outside of this state, that would constitute a ground for disciplinary sanction under [IC 25-1-9](#) and has not been the subject of a disciplinary action as stated in [IC 25-27-1-6\(a\)\(2\)](#).
- (4) Successfully completes the examination provided by the ~~committee board~~. The uniform criterion-referenced passing score on the physical therapy or physical therapist's therapist assistant examination, which has been adopted by the board of directors of the Federation of State Boards of Physical Therapy, is the required passing score. This criterion-referenced passing score shall be a scaled score of six hundred (600).
- ~~(5) Submits one (1) passport-type quality photograph of the applicant taken within the last eight (8) weeks.~~
- ~~(6) (5) Submits an official transcript of grades from a physical therapy or physical therapist's therapist~~

assistant school showing evidence that the applicant is a graduate of a physical therapy or a physical therapist's **therapist** assistant program that has been approved by the ~~committee~~ **board** under [844 IAC 6-1-4](#) [842 IAC 1-1-3](#) and that a degree has been conferred.

~~(7)~~ **(6)** Submits a certified copy of an English translation of any document that is not in English.

~~(8)~~ **(7)** Meets all other minimum requirements specified in [IC 25-27-1](#).

(b) The ~~committee~~ **board** may issue a license by examination to an applicant who has been educated as a physical therapist in a foreign country who submits the following:

(1) Information required by subsection (a).

(2) A certified copy of all academic records and an evaluation, from an accredited evaluation service approved by the ~~committee~~ **board**, of all academic records and credentials for the ~~committee's~~ **board's** consideration in determining educational equivalence, such equivalence to be determined by the ~~committee~~ **board**.

(c) For an applicant who has failed to pass the examination, in this state or any other state, the following apply:

(1) After the first attempt, the applicant may retake the examination at their first available opportunity.

(2) After the second attempt, the applicant must wait at least ninety (90) days before reapplying to take the licensure examination.

(3) After the third attempt or subsequent attempt, the applicant must wait at least one hundred eighty (180) days before reapplying to take the licensure examination.

(4) An applicant for a license to practice physical therapy or for a certificate to act as a physical therapist assistant may take the respective examination not more than six (6) times.

~~(4)~~ **(5)** The applicant must pay the reexamination fee specified in [844 IAC 6-2-2](#) [842 IAC 1-2-1](#).

(Indiana Board of Physical Therapy; [842 IAC 1-3-2](#); filed Mar 10, 1983, 3:59 p.m.: 6 IR 774; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1939; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2733; filed Apr 5, 1990, 2:45 p.m.: 13 IR 1414; filed Sep 22, 1994, 4:30 p.m.: 18 IR 264; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 204; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-3-2](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-3-2](#)) by P.L.160-2019, SECTION 31, effective July 1, 2019.

SECTION 7. [842 IAC 1-3-5](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-3-5](#) Social Security numbers

Authority: [IC 4-1-8-1](#); [IC 25-27-1-5](#)

Affected: [IC 25-27-1](#)

Sec. 5. (a) An applicant who applies for a license, certificate, or permit under [IC 25-27-1](#) must submit to the ~~committee~~ **board** the applicant's United States Social Security number.

(b) No application for a license, certificate, or permit will be approved before the Social Security number is submitted to the ~~committee~~ **board**.

(c) The ~~bureau~~ **agency** and the ~~committee~~ **board** will **only** release the applicant's Social Security number as provided in state or federal law.

(d) The ~~bureau~~ **agency** and the boards may allow access to the Social Security number of each person who holds a license, certificate, or permit issued under [IC 25-27-1](#) or has applied for a license, certificate, or permit under [IC 25-27-1](#) to the following:

(1) A testing service that provides the examination for licensure to the ~~bureau~~ **agency** or the boards.

(2) An individual state regulatory board or an organization composed of state regulatory boards for the applicant's or licensee's profession for the purpose of coordinating licensure and disciplinary activities between the individual states.

(Indiana Board of Physical Therapy; [842 IAC 1-3-5](#); filed Aug 26, 2004, 10:20 a.m.: 28 IR 205; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar

23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-3-6](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-3-5](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 8. [842 IAC 1-4-1](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-4-1](#) Mandatory registration; renewal

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-27-1-8](#)

Sec. 1. (a) Every physical therapist holding a license issued by the ~~committee~~ **board** shall renew his or her license biennially on or before July 1 of each even-numbered year.

(b) A licensee's failure to receive notification of renewal due to failure to notify the ~~committee~~ **board** of a change of address or name shall not constitute an error on the part of the ~~committee, board,~~ **board** or ~~bureau~~ **agency**, nor shall it exonerate or otherwise excuse the licensee from renewing such license.

(c) Every physical ~~therapist's~~ **therapist** assistant holding a certificate issued by the ~~committee~~ **board** shall renew his or her certificate biennially on or before July 1 of each even-numbered year.

(d) A certificate holder's failure to receive notification of renewal due to failure to notify the ~~committee~~ **board** of a change of address or name shall not constitute an error on the part of the ~~committee, board,~~ **board** or ~~bureau~~ **agency**, nor shall it exonerate or otherwise excuse the certificate holder from renewing such certificate.

(Indiana Board of Physical Therapy; [842 IAC 1-4-1](#); filed Mar 10, 1983, 3:59 p.m.: 6 IR 775; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2735; filed Sep 22, 1994, 4:30 p.m.: 18 IR 266; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Feb 10, 2003, 3:30 p.m.: 26 IR 2372; readopted filed Dec 1, 2009, 9:13 a.m.: [20091223-IR-844090779RFA](#); readopted filed Jun 16, 2010, 12:14 p.m.: [20100630-IR-844090779RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-4-1](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-4-1](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 9. [842 IAC 1-4-2](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-4-2](#) Address; change of name

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-27-1-8](#)

Sec. 2. Each licensee is responsible for providing the ~~committee~~ **board** with a current address, telephone number, and name change, as applicable, within thirty (30) days of the change.

(Indiana Board of Physical Therapy; [842 IAC 1-4-2](#); filed Mar 10, 1983, 3:59 p.m.: 6 IR 775; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2735; filed Sep 22, 1994, 4:30 p.m.: 18 IR 266; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; readopted filed Oct 4, 2007, 3:35 p.m.: [20071031-IR-844070051RFA](#); readopted filed Nov 25, 2013, 9:24 a.m.: [20131225-IR-844130307RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-4-2](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-4-2](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 10. [842 IAC 1-4-3](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-4-3](#) Reinstatement of delinquent license

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-27-1-8](#)

Sec. 3. (a) A physical therapist or physical therapist's **therapist** assistant who is less than three (3) years delinquent in renewing a license or certificate shall be reinstated upon receipt of a renewal application, reinstatement fee, and renewal fees **satisfaction of the requirements in [IC 25-27-1-8\(c\)](#)**.

(b) If more than three (3) years have elapsed since the expiration of a license or certificate, the applicant shall meet all requirements of ~~844 IAC 6-3-1~~ **[842 IAC 1-3-1](#)** except that, where the applicant has not practiced for more than three (3) years, the ~~committee~~ **board** may, after an appearance before the ~~committee~~, **board**, require the applicant to retake and pass the examination provided by the ~~committee~~ **board in addition to completion of continuing competency courses**.

(Indiana Board of Physical Therapy; [842 IAC 1-4-3](#); filed Mar 10, 1983, 3:59 p.m.: 6 IR 775; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2735; filed Apr 5, 1990, 2:45 p.m.: 13 IR 1414; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 206; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-4-3](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-4-3](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 11. [842 IAC 1-5-1](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-5-1](#) Duties of suspended licensees, certificate holders

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-1-9](#)

Sec. 1. In any case where a person's license or certificate has been suspended under [IC 25-1-9](#), said person shall do the following:

(1) Within thirty (30) days from the date of the order of suspension, file with the physical therapy ~~committee~~ **board** an affidavit showing the following:

(A) All active patients then under the licensee's or certificate holder's care have been notified in the manner and method specified by the committee of the licensee's or certificate holder's suspension and consequent inability to act for or on their behalf in a professional capacity. Such notice shall advise all such patients to seek the services of another licensee or certificate holder of good standing of their own choice.

(B) All hospitals and medical and health care facilities where such licensee or certificate holder has privileges or staff status have been informed of the suspension order.

(C) Reasonable arrangements were made for the transfer of patient records, radiographic studies, and test results, or copies thereof, to a succeeding licensee or certificate holder employed by the patient or those responsible for the patient's care.

(2) Prove compliance with this section as a condition precedent to reinstatement.

(Indiana Board of Physical Therapy; [842 IAC 1-5-1](#); filed Aug 6, 1987, 3:00 p.m.: 10 IR 2736; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 206; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-6-3](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-5-1](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 12. [842 IAC 1-5-2](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-5-2](#) Protection of patients' interests

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-1-9](#)

Sec. 2. Whenever a person's license or certificate has been suspended under [IC 25-1-9](#) and said person has not fully complied with section 3 of this rule and this section, or if said licensee or certificate holder has disappeared, died, or is otherwise unable to comply with section 3 of this rule and this section, the physical therapy ~~committee~~ **board** shall request the ~~health professions bureau or the Indiana Chapter of the American Physical Therapy Association~~ **Indiana professional licensing agency** to take such action as may be appropriate to protect the interests of that person's patients.

(Indiana Board of Physical Therapy; [842 IAC 1-5-2](#); filed Aug 6, 1987, 3:00 p.m.: 10 IR 2736; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 206; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-6-4](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-5-2](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 13. [842 IAC 1-6-1](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-6-1](#) Definitions

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-1-9](#)

Sec. 1. For purposes of the standards of professional conduct and competent practice of physical therapy or practice as a physical therapist assistant, the following definitions apply:

(1) "Practitioner" means a person holding a license to practice physical therapy; a person holding a certificate to practice as a physical therapist assistant; or a person holding a temporary permit issued by the ~~committee~~ **board**.

(2) "Professional incompetence" may include, but is not limited to, a pattern or course of repeated conduct by a practitioner demonstrating a failure to exercise such reasonable care and diligence as is ordinarily exercised by practitioners in the same or similar circumstances in the same or similar locality.

(Indiana Board of Physical Therapy; [842 IAC 1-6-1](#); filed Oct 3, 1988, 2:36 p.m.: 12 IR 386; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; readopted filed Oct 4, 2007, 3:35 p.m.: [20071031-IR-844070051RFA](#); readopted filed Nov 25, 2013, 9:24 a.m.: [20131225-IR-844130307RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-7-1](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-6-1](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 14. [842 IAC 1-6-2](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-6-2](#) Standards of professional conduct and competent practice

Authority: [IC 25-27-1-5](#)

Affected: [IC 16-39-1-1](#); [IC 25-1-9-9](#); [IC 25-27-1](#); [IC 34-6-2-99](#); [IC 34-30-15-1](#)

Sec. 2. (a) A practitioner when engaging in the practice of physical therapy shall abide by, and comply with, the standards of professional conduct in this section.

(b) A practitioner shall maintain the confidentiality of all knowledge and information regarding a patient, including, but not limited to, the patient's:

- (1) diagnosis;
- (2) treatment; and
- (3) prognosis;

of which the practitioner has knowledge during the course of the patient-practitioner relationship. Information about a patient shall be disclosed by a practitioner when required by law, including, but not limited to, the requirements of [IC 34-30-15-1](#) et seq. and [IC 16-39-1-1](#) et seq., and any amendments thereto, or when authorized by the patient or those responsible for the patient's care.

(c) A practitioner shall give a truthful, candid, and reasonably complete account of the patient's condition to the patient or to those responsible for the patient's care, except where a practitioner reasonably determines that the information is detrimental to the physical or mental health of:

- (1) the patient; or
- (2) those persons responsible for the patient's care.

(d) The practitioner shall give reasonable written notice to the patient and to ~~the~~ **any** referring physician;

~~podiatrist, psychologist, chiropractor, or dentist~~ **provider** when the practitioner withdraws from a case so that another referral may be made by the referring ~~physician, podiatrist, psychologist, chiropractor, or dentist~~ **provider**. A practitioner shall not abandon a patient. A practitioner who withdraws from a case, except in emergency circumstances, shall, upon written request, comply with the provisions of [IC 16-39-1-1](#) et seq., and of any subsequent amendment or revision thereof, when a patient requests health records.

(e) A practitioner shall exercise reasonable care and diligence in the treatment of patients based upon generally accepted scientific principles, methods, treatments, and current professional theory and practice.

(f) A practitioner shall not:

- (1) represent;
- (2) advertise;
- (3) state; or
- (4) indicate;

the possession of any degree recognized as the basis for licensure to practice physical therapy unless the practitioner is actually licensed on the basis of such degree in the state or states in which he/she practices.

(g) A physical therapist shall not delegate to supportive personnel any service that requires the skill, knowledge, and judgment of the licensed physical therapist.

(h) A physical ~~therapist's~~ **therapist** assistant shall not accept a delegation of a service that exceeds the scope of practice of their certificate as defined in ~~844 IAC 6-1-2(g)(3)~~ [842 IAC 1-1-1\(g\)\(3\)](#).

(i) A physical therapist must have the knowledge, skill, ability, and competence to perform dry needling. After June 30, 2024, to be deemed competent to perform dry needling, a physical therapist must successfully complete a minimum of fifty (50) hours of education specific to dry needling theory, practice, and technique of which forty (40) hours must be completed in person.

(1) A physical therapist may apply dry needling specific education hours completed within the entry-level education program toward the fifty (50) hour requirement. The physical therapist must complete any remaining education hours to reach a total of fifty (50) hours prior to providing dry needling services.

(2) The physical therapist bears the burden of proof of sufficient education and training to ensure competence with the treatment or intervention. Education courses that meet the requirements of [842 IAC 1-7-5](#) satisfy this requirement.

(3) If requested by the board or a member of the public, the physical therapist providing dry needling services shall provide documentation of completion of the training required by this rule.

(4) Failure to provide written documentation to the board in compliance with this requirement shall be deemed prima facie evidence that the physical therapist is not competent and shall not be permitted to perform dry needling.

(5) Dry needling shall be performed directly by the physical therapist and shall not be delegated.

~~(j)~~ **(j)** A practitioner who has personal knowledge based upon a reasonable belief that another practitioner holding the same license or certificate has engaged in illegal, unlawful, incompetent, or fraudulent conduct in the practice of physical therapy shall promptly report such conduct to a peer review or similar body, as defined in [IC 34-6-2-99](#) and as provided in [IC 34-30-15-1](#) et seq., having jurisdiction over the offending practitioner and the matter. This provision does not prohibit a practitioner from promptly reporting said conduct directly to the physical therapy ~~committee~~ **board**. Further, a practitioner who has personal knowledge of any person engaged in, or attempting to engage in, the unauthorized practice of medicine or physical therapy shall promptly report such conduct to the ~~medical licensing board or the physical therapy committee~~. **Indiana board of physical therapy.**

~~(k)~~ **(k)** A practitioner who voluntarily submits himself or herself to, or is otherwise undergoing a course of treatment for:

- (1) addiction;
- (2) severe dependency upon alcohol or other drugs or controlled substances; or
- (3) psychiatric impairment;

where such treatment is sponsored or supervised by a committee for impaired practitioners of a state, regional, or local organization of professional health care providers, or where such treatment is sponsored or supervised by a committee for impaired practitioners of a hospital, shall be exempt from reporting to a peer review committee as

set forth in subsection ~~(i)~~ **(j)** or to the physical therapy ~~committee~~ **board** so long as the practitioner is complying with the course of treatment and making satisfactory progress. If the practitioner fails to comply with or is not benefited by the course of treatment, the practitioner-chief administrative officer, his or her designee, or any member of the committee for impaired practitioners shall promptly report such facts and circumstances to the physical therapy ~~committee~~ **board**. Subsection ~~(i)~~ **(j)** and this subsection shall not, in any manner whatsoever, directly or indirectly, be deemed or construed to prohibit, restrict, limit, or otherwise preclude the physical therapy ~~committee~~ **board** from taking such action as it deems appropriate or as may otherwise be provided by law.

~~(k)~~ **(l)** Fees charged by a practitioner for his or her professional services shall be reasonable and shall reasonably compensate the practitioner only for services actually rendered.

~~(l)~~ **(m)** A practitioner shall not enter into agreement for, charge, or collect an illegal or clearly excessive fee.

~~(m)~~ **(n)** Factors to be considered in determining the reasonableness of a fee include, but are not limited to, the following:

- (1) The difficulty or uniqueness, or both, of the services performed and the time, skill, and experience required.
- (2) The fee customarily charged in the locality for similar practitioner services.
- (3) The amount of the charges involved.
- (4) The quality of performance.
- (5) The nature and length of the professional relationship with the patient.
- (6) The experience, reputation, and ability of the practitioner in performing the kind of services involved.

~~(n)~~ **(o)** A practitioner shall not pay, demand, or receive compensation for referral of a patient except for a patient referral program operated by a professional society or association.

~~(o)~~ **(p)** A practitioner shall be responsible for the conduct of each and every person employed by the practitioner for every action or failure to act by said employee or employees in the course of the employment relationship.

~~(p)~~ **(q)** A practitioner shall not, on behalf of:

- (1) himself or herself;
- (2) a partner;
- (3) an associate;
- (4) a shareholder in a professional corporation; or
- (5) any other practitioner or specific health care provider affiliated with the practitioner;

use, or participate in the use of, any form of public communication containing a false, fraudulent, misleading, deceptive, or unfair statement or claim.

~~(q)~~ **(r)** Subject to the requirements of subsection ~~(p)~~ **(q)**, and in order to facilitate the process of informed selection of a practitioner by the public, a practitioner may advertise services through the public media, provided that the advertisement is dignified and confines itself to the existence, scope, nature, and field of practice of physical therapy.

~~(r)~~ **(s)** If the advertisement in subsection ~~(q)~~ **(r)** is communicated to the public by ~~radio, cable, or television~~ **audio or video format**, it shall be prerecorded and approved for broadcast by the practitioner, and a recording and transcript of the actual transmission shall be retained by the practitioner for a period of five (5) years from the last date of broadcast.

~~(s)~~ **(t)** If a practitioner advertises a fee for:

- (1) a service;
- (2) a treatment;
- (3) a consultation;
- (4) an examination; or
- (5) any other procedure;

the practitioner must render that service or procedure for no more than the fee advertised.

(t) **(u)** Except as otherwise provided in these rules, a practitioner shall not contact or solicit individual members of the public personally or through an agent in order to offer services to such person or persons unless that individual initiated contact with the practitioner for the purpose of engaging that practitioner's professional services.

~~(u)~~ **(v)** A practitioner may, whenever the practitioner believes it to be beneficial to the patient, and upon approval of the referring physician, podiatrist, psychologist, chiropractor, or dentist, **provider**, send or refer a patient to a qualified specific professional health care provider for treatment or health care that falls within the specific professional health care provider's scope of practice. Prior to any such referral, however, the practitioner shall examine or consult with, or both, the patient and the referring physician, podiatrist, psychologist, chiropractor, or dentist **provider** to ensure that a condition exists in the patient that would be within the scope of practice of the specific professional health care provider to whom the patient is referred or sent.

(v) A practitioner, upon:

(1) his or her retirement;

(2) discontinuation of the practice of physical therapy;

(3) leaving or moving from a community;

~~shall not sell, convey, or transfer for valuable consideration, remuneration, or anything of value patient records of that practitioner to any other practitioner.~~

(w) A practitioner, upon:

(1) retiring from private practice;

(2) discontinuation of the private practice of physical therapy;

(3) leaving or moving from a community;

~~shall notify all of his or her active patients in writing, or by publication once a week for three (3) consecutive weeks in a newspaper of general circulation in the community, that he or she intends to discontinue his or her practice of physical therapy in the community and shall notify the referring physician, podiatrist, psychologist, chiropractor, or dentist of each active patient. The practitioner discontinuing his or her practice shall make reasonable arrangements with his/her active patients for the transfer of his/her records, or copies thereof, to the referring physician, podiatrist, psychologist, chiropractor, or dentist who shall make the records, or copies thereof, available to the succeeding practitioner or to a program conducted by a professional society or association.~~

~~(x) As used herein, "active patient" applies and refers to a person whom the practitioner has:~~

~~(1) examined;~~

~~(2) treated;~~

~~(3) cared for; or~~

~~(4) otherwise consulted with;~~

~~during the two (2) year period prior to retirement, discontinuation of the practice of physical therapy, or leaving or moving from a community.~~

(w) The practitioner shall give reasonable written notice to an active patient or those responsible for the patient's care when the practitioner withdraws from a case so that another practitioner may be employed by the patient or by those responsible for the patient's care. A practitioner shall not abandon a patient [sic, patient]. As used in this section, "active patient" means a person whom the practitioner has examined, cared for, or otherwise consulted with, during the two (2) year period prior to retirement, discontinuation of practice, or leaving or moving from the community.

(x) A practitioner who withdraws from a case, except in emergency circumstances, shall, upon written request, make available to the license holder's patient all records, test results, histories, diagnoses, files, and information relating to said patient which are in the practitioner's custody, possession, or control, or copies of such documents herein before described.

(y) A practitioner shall not base his fee upon the uncertain outcome of a contingency, whether such contingency be the outcome of litigation or any other occurrence or condition that may or may not develop, occur, or happen.

(z) A practitioner shall not attempt to exonerate himself or herself from or limit his or her liability to a patient for

his or her personal malpractice except that a practitioner may enter into agreements that contain informed, voluntary releases or waivers of liability, or both, in settlement of a claim made by a patient or by those responsible for a patient's care.

(aa) A practitioner shall not attempt to preclude, prohibit, or otherwise prevent the filing of a complaint against him or her by a patient or other practitioner for any alleged violation of this title, [IC 25-27-1](#) et seq., or any other law.

(bb) A practitioner shall maintain adequate patient records.

(cc) A practitioner shall not interfere with, or refuse to cooperate in, an investigation or disciplinary proceeding by willful misrepresentation of facts or the use of threats or harassment against any patient or witness to prevent them from providing evidence in a disciplinary proceeding or any legal action.

(dd) A practitioner shall not aid or abet a person not licensed or certified in this state who directly or indirectly performs activities requiring a license or certificate.

(ee) A practitioner shall not practice as a physical therapist or work as a physical therapist's therapist assistant when physical or mental abilities are impaired by the use of:

- (1) controlled substances;
- (2) other habit-forming drugs;
- (3) chemicals; or
- (4) alcohol.

(ff) A practitioner shall not engage in the performance of substandard care due to a deliberate or negligent act or failure to act regardless of whether there was actual injury to the patient.

(gg) A practitioner shall not engage in sexual misconduct, including the following:

- (1) Making sexual advances.
- (2) Requesting sexual favors.
- (3) Engaging in verbal conduct or physical contact of a sexual nature with patients **or** clients. ~~or coworkers.~~

(hh) A practitioner who has been convicted of a felony, or who has pled no contest or any other finding of guilt as to such felony, in this or any other state, territory, or country, which demonstrates impaired judgment or risk to the public in the practitioner's future provision of physical therapy service, may be deemed to be in violation of this section.

(ii) Failure to comply with the above standards of professional conduct and competent practice of physical therapy may result in disciplinary proceedings against the offending practitioners. Further, all practitioners licensed in Indiana shall be responsible for having knowledge of these standards of conduct and practice.

(Indiana Board of Physical Therapy; [842 IAC 1-6-2](#); filed Oct 3, 1988, 2:36 p.m.: 12 IR 386; errata filed Oct 11, 1988, 3:00 p.m.: 12 IR 391; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 207; readopted filed Nov 17, 2010, 9:48 a.m.: [20101215-IR-844100405RFA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-7-2](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-6-2](#)) by P.L.160-2019, SECTION 31, effective July 1, 2019.

SECTION 15. [842 IAC 1-7-2](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-7-2](#) Responsibilities of licensees

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-27-1](#)

Sec. 2. A license or certificate holder shall do the following:

- (1) Certify completion of continuing competency activities required by this rule at the time of license or certification renewal.
- (2) Retain verification of completion of continuing competency activities required by this rule for three (3) years after the last renewal date.
- (3) Present proof of completion of continuing competency activities required by this rule at the request of the ~~committee in a format that is verifiable~~ **board on a form that is approved** by the ~~committee board~~.

(Indiana Board of Physical Therapy; [842 IAC 1-7-2](#); filed Jan 30, 2013, 12:31 p.m.: [20130227-IR-844120204FRA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-8-2](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-7-2](#)) by P.L. 160-2019, SECTION 31, effective July 1, 2019.

SECTION 16. [842 IAC 1-7-4](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-7-4](#) "Category I continuing competency activities" and "category II continuing competency activities" defined

Authority: [IC 25-27-1-5](#)

Affected: [IC 25-1-4-0.2](#)

Sec. 4. (a) As used in this rule, "category I continuing competency activities" includes the following and must be at least one (1) contact hour in length and be relevant to the practice of physical therapy:

- (1) Formally organized courses.
- (2) Workshops.
- (3) Seminars.
- (4) Symposia.
- (5) Home study programs, including approved computer, audio, and video instructional programs, designed by ~~committee-approved~~ **board approved** organizations and subject to ~~committee board~~ verification and approval procedures.
- (6) Approved "for credit" courses that are related to the practice of physical therapy from an approved organization as defined in [IC 25-1-4-0.2](#).

(b) The following conversion will be used for category I continuing competency credit:

- (1) One (1) semester hour equals fifteen (15) contact hours.
- (2) One (1) quarter hour equals ten (10) contact hours.
- (3) One (1) trimester hour equals twelve and one-half (12.5) hours.

(c) As used in this rule, "category II continuing competency activities" includes the following:

- (1) Professional research/writing. A licensee or certificate holder may receive continuing competency credit for publication of scientific papers, abstracts, or review articles in peer-reviewed and other professional journals; publication of textbook chapters; and poster or platform presentations at conferences sponsored by any approved entity up to a maximum of ten (10) hours per biennium. The following conversion will be used for continuing competency credit:
 - (A) Ten (10) hours for each refereed article.
 - (B) Three (3) hours for each nonrefereed article, abstract of published literature, or book review.
 - (C) Eight (8) hours for each published textbook chapter.
 - (D) Five (5) hours for each poster or platform presentation or review article.
- (2) Teaching as an adjunct responsibility at an accredited PT or PTA program. Two (2) hours of credit for each academic credit hour awarded by the accredited PT or PTA program for the first time the course is taught up to a maximum of ten (10) hours per biennium.
- (3) Participation as a presenter in an approved workshop, continuing education course, seminar, or symposium. Two (2) contact hours for each one (1) hour of presentation for first event, with a maximum of ten (10) hours per biennium.
- (4) Supervision of physical therapist students or physical ~~therapist's~~ **therapist** assistant students from accredited programs in full-time clinical internships or residency programs. One (1) contact hour for every **every** [sic] forty (40) hours of supervision with a maximum of ten (10) contact hours per biennium.
- (5) In-house or in-service seminars related to the practice of physical therapy. One (1) credit hour for each

hour of in-service. Maximum of four (4) hours per biennium. Documentation shall consist of a description of the topic, date, duration, and the name of the presenter.

(6) Actively participating with professional organizations related to the practice of physical therapy, with one (1) credit hour for each six (6) months service as an officer, delegate, or committee **board** member, for a maximum of six (6) hours per biennium.

(7) Certification of clinical specialization by the American Board of Physical Therapy Specialties (ABPTS) or another organization approved by the Indiana physical therapy ~~committee~~ **board**: ten (10) hours maximum per biennium. Credit may be awarded only in the year that certification or recertification is obtained.

(8) Certificate of Advanced Proficiency for the PTA by the APTA: five (5) hours maximum per biennium to be awarded. Credit may be awarded only in the year that certification or recertification is obtained.

(9) Attendance at INAPTA state or district meetings that are at least one (1) hour in length, for a maximum of one (1) hour per meeting, for a maximum of four (4) hours per biennium.

(10) Other scholarly or educational, or both, activities related to the practice or management of physical therapy and not described above, with approval from the ~~committee~~ **board**.

(Indiana Board of Physical Therapy; [842 IAC 1-7-4](#); filed Jan 30, 2013, 12:31 p.m.: [20130227-IR-844120204FRA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-8-4](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-7-4](#)) by P.L.160-2019, SECTION 31, effective July 1, 2019.

SECTION 17. [842 IAC 1-7-5](#) IS AMENDED TO READ AS FOLLOWS:

[842 IAC 1-7-5](#) Approved organizations; standards for approval

Authority: [IC 25-1-4](#); [IC 25-27-1-5](#)

Affected: [IC 25-1-4-0.2](#); [IC 25-27-1](#)

Sec. 5. (a) In addition to those approved organizations approved under [IC 25-1-4-0.2](#), the following organizations are approved organizations for the purpose of approving and sponsoring continuing competency courses without making further application to the ~~committee~~ **board**:

- (1) American Physical Therapy Association (APTA).
- (2) American Physical Therapy Association Indiana Chapter (~~INAPTA~~). **(APTA Indiana).**
- (3) Federation of State Boards of Physical Therapy (FSBPT).
- (4) ~~United States Department of Education.~~
- (5) ~~Council on Postsecondary Education.~~
- (6) ~~Joint Commission on Accreditation of Hospitals.~~
- (7) ~~Joint Commission on Health Care Organizations.~~
- (8) ~~Federal, state, and local governmental agencies.~~
- (9) ~~A national, state, district, or local organization that operates as an affiliated entity under the approval of any organization listed in subdivisions (1) through (8).~~
- (10) ~~A college or other teaching institution accredited by the United States Department of Education or the Council on Postsecondary Education or a regional accreditation association.~~
- (4) A national, state, district, or local organization that operates as an affiliated entity under the approval of any organization listed in the [sic] subdivisions (1) through (3).**

(b) The ~~committee~~ **board** will approve continuing competency activities if it determines that the activity:

- (1) contributes directly to professional competency;
- (2) relates directly to the practice, management, or education of physical therapy practitioners; and
- (3) is conducted by individuals who have demonstrated expertise in the subject matter of the program.

Prior approval by the ~~committee~~ **board** is not required for the aforementioned approved organizations. Proof of content shall be demonstrated by the original workshop or conference brochure, agenda, or materials given to participants during the presentations and evidence of successful completion of the course provided by the course instructor, such as certificate of completion or signed agenda indicating completion.

(Indiana Board of Physical Therapy; [842 IAC 1-7-5](#); filed Jan 30, 2013, 12:31 p.m.: [20130227-IR-844120204FRA](#); readopted filed Nov 22, 2016, 12:11 p.m.: [20161221-IR-844160317RFA](#); readopted filed May 26, 2022, 9:18 a.m.: [20220622-IR-842220117RFA](#); filed Mar 23, 2023, 1:38 p.m.: [20230419-IR-842220353FRA](#)) NOTE: Transferred from the Medical Licensing Board of Indiana ([844 IAC 6-8-5](#)) to the Indiana Board of Physical Therapy ([842 IAC 1-7-5](#)) by P.L.160-2019, SECTION 31, effective July 1, 2019.

SECTION 18. THE FOLLOWING ARE REPEALED: [842 IAC 1-3-3](#); [842 IAC 1-3-4](#).

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